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| SERIAL NUMBER 10/648,786 | FILING OR 371(c) DATE 08/27/2003 RULE | CLASS 424 | GROUP ART UNIT 1646 | ATTORNEY DOCKET NO. 1488.130000B/EKS/EJH |
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** CONTINUING DATA *****

This appln claims benefit of 60/413,861 09/27/2002
 and claims benefit of 60/406,922 08/30/2002
 and is a CIP of 09/565,918 05/05/2000 PAT 6,433,147
 which claims benefit of 60/132,922 05/06/1999
 and is a CIP of 09/013,895 01/27/1998 PAT 6,342,363
 which claims benefit of 60/037,829 02/05/1997
 and claims benefit of 60/035,722 01/28/1997

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/18/2003

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|---|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY MD | SHEETS DRAWING 10 | TOTAL CLAIMS 77 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

28393

TITLE

DEATH DOMAIN CONTAINING RECEPTOR 4 ANTIBODIES AND METHODS

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| FILING FEE RECEIVED 1926 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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